

2019 Summer Camp Registration Form

Please print clearly using ink

	Club Member	
П	Non Club Member	

Camper	Information					
Child's Name:	Birthdate:	Gender: □ Male □ Female	Grade in Fall:			
Mailing Address:	City:	State:	Zip:			
Ethnic Information (optional): ☐ Hispanic ☐ Caucasian/White ☐ Native Hawaiian/Pa ☐ Asian ☐ Native American ☐ African American	☐ Othe	r:				
Does your child have any medical problems or allergies?	☐ Yes ☐ No If y	yes, please explain:				
Note: The staff of the Boys & Girls Club cannot administer medic Please ask membership services for the Club's full medica		ust be kept in the admir	nistrative office.			
Does your child have special needs? $\ \square$ Yes $\ \square$ No If yes, please ask membership services for the Club's information	sheet on serving memb	ers with special needs.				
All youth in the summer camp program are required to be insured. The Boys & Girls Club requires the information below as assurance.						
Insurance Company Name:						
Insurance Policy Number:	Insurance Policy Gro	oup Number:				
Parent/Guardian	Contact Informat	ion				
Parent/Guardian:	Phone:					
Employer:	Work Phone:					
Other Parent/Guardian:	Phone:					
Employer: The Club will make every effort to reach a parent/guardian listed parent/guardian, please list one other local contact person.	Work Phone: in case of emergency. F	lowever, in case we are	unable to reach a			
Emergency Contact Person:	Phone:					
Relationship to child:	Work Phone:					
	n to Participate					
Please read and initial the following: I am the parent/guardian of the child named above who is	registering for the Bo	ys & Girls Club Summe	er Camp Program.			
I give permission for my child to take part in Club ac safeguard the health & safety of all participants. I v claims arising from gross negligence or willful acts of Club activities.	vaive any claims agair	nst the board, staff or	volunteers except			
I understand that my child will be participating in pl participate in any off-site activities under the superv						
I understand that the Club opens for campers at 7: must pick up my child no later than 5:30pm or a lat		e my child at the Club	before 7:30am and I			
I understand that if I am called to pick up my child omy child within one hour or a late fee will apply.	due to illness, injury, o	or for disciplinary reas	ons, I must pick up			
I understand that if my child is sent home at any tin privileges to participate in some or all future camps			ns, he/she may lose			
Signature	c	Date				

Club Members: \$100/week Non-Members: \$110/week		Scholarships (limited): \$50/week Late registration: \$10 Late Fee		Week 3: \$60/3 day camp Week 3 Scholarship: \$30		
Camp Dates	STEAM Camps Sport 2nd-5th grade 3rd-6th	Sports Camps 3 rd -6 th grade Camp limits are noted	Sports Camps Brd-6th grade Camp limits are STEAM Camps 6th-12th grade 20 max unless noted	If you have a credit card on file, it will be charged on this date	Payment Record (for office use only)	
Week 1 5/17 - 6/21	Formula for Fun 🗆	Martial Arts ☐ 40 max.	Tasting Perfection FULL	June 7 th	Date Amt Rcpt# Initials	□ Ca □ Cre □ Ch
Week 2 6/24 - 6/28	The Big 5	Lacrosse 40 max. FULL	Mission Control FULL	June 14 th	Date Amt Rcpt# Initials	□ Ca □ Cre
Week 3 3 day camp 7/1 - 7/3	Magic Beans	Flag Football 40 max.	Bounty of the Umpqua FULL	June 21st	Date Amt.30/60 Rcpt# Initials	□ Ca
Week 4 7/8 - 7/12	Crazy Contraptions	Golf Daniel Communication Comm	Papercuts: Think Outside the Box FULL	June 28 th	Date Amt Rcpt# Initials	□ Ca
Week 5 7/15 - 7/19	Take Flight 🗆	Bowling 20 max. FULL	Project D.I.A.L. 10 max FULL	July 3 rd	Date Amt Rcpt# Initials	□ Ca □ Cre
Week 6 7/22 - 7/26	LEGO Bot Builders □ FULL	Fishing Day 20 max. FULL	Snel Fietsen FULL Own bike required!	July 12 th	Date Amt Rcpt# Initials	□ Ca □ Cre
Week 7 7/29 - 8/2	Wild Side FULL □	Disc Golf- 20 max. FULL	Flat Earth Theory FULL	July 19 th	Date Amt Rcpt# Initials	□ Ca □ Cre □ Ch
Week 8 8/5 - 8/9	Passports	Basketball 40 max. FULL	Be Great Film Studio FULL	July 27 th	Date Amt Rcpt# Initials	□ Ca □ Cre
Week 9 8/12 - 8/16	Color Coding FULL	Bowling 20 max. FULL	The Radd Cobra Areade FULL	Aug 2 nd	Date Amt Rcpt# Initials	□ Ca □ Cro □ Ch
Week 10 8/19 - 8/23	Endless Summer	Volleyball □ 40 max. FULL	FULL Fantasy Feast 2.0	Aug 9 th	Date Amt Rcpt# Initials	□ Ca

Transferring a Camp Fee:

A camp fee may be transferred to another camp if requested at least **7 days prior** to the camp's start date.

A \$10 administrative fee will be charged for all transfer requests after the 7 day deadline.

I authorize the Club to charge my credit card for each camp on the dates indicated above.

Cardholder Name (please print) ______ Signature______

Refund Policy:

A <u>refund minus a \$10 administrative fee</u> will be given if a refund is requested at least **7 days prior** to the camp's start date. <u>No refund</u> will be given for camp cancellations that are requested after the 7 day deadline (you may transfer the camp for \$10 fee, if space is available).

Credit Card #: _______ _ ____ _ _ _ _ _ _ _ _ _ _ Exp Date mm/yy: ___ /__ CVV __ _ _

No refund will be given if my child is asked to leave camp due to disciplinary reasons.